

[2 March, 2007]

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Psychiatric Wings of medical colleges/Government run Mental Hospitals in various States. The Central Government supplements the efforts of State Government under National Mental Health Programme. So far, the Central Government have supported 106 districts under District Mental Health Programme, 55 Medical colleges upto Rs. 50 lakhs per Medical College for strengthening of Psychiatric Wing, 20 Mental hospitals for modernization/upgradation upto Rs. 3.00 crores per mental hospital.

Increase of MMR

507 SHRIMATI S.G. INDIRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that according to a UNICEF report, in India only 34 per cent of the deliveries take place in health facilities with the percentage even higher in the rural areas;

(b) whether it is also a fact that due to the above maternal mortality rate goes up; and

(c) whether it is also a fact that the UNICEF had also said in its report that the health system has failed to provide even basic health care facilities in many areas?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (c) As per the District Level Household Survey II (2002-04) Report, the Institutional Delivery Rate in India is 40.5%, and as per the National Family Health Survey-III (2005-06) Report, it is 41 % all over India and 31 % in the rural areas. The results of both the surveys are at Statement-I and Statement-II (see below).

It is true that institutional delivery can take care of complications during delivery and can thereby reduce maternal mortality.

The Government of India, with a view to increase access to quality health care including services Safe Motherhood, has launched the National Rural Health Mission (NRHM) with special emphasis on improving the health status of rural population throughout the country. The Mission will operate over a period of seven years from 2005 to 2012. Under the NRHM (2005-2012) and the RCH Programme Phase II, services will be strengthened through'

* Implementation of the Janani Suraksha Yojana (JSY) a scheme to promote Institutional Delivery for reducing Maternal Mortality Rate (MMR) and Infant Mortality Rate (IMR) by providing quality Maternal Care during pregnancy, delivery and immediate

post-delivery period with appropriate referral transport system alongwith cash assistance to pregnant women with a special focus on Low Performing States.

In Low Performing States (LPS), all women including SC/STs delivering in the Govt. Health Centre, General ward of Distt. And States Hospitals and accredited Private Institutions get the benefits of cash assistance scheme. (LPS: Uttar Pradesh, Uttaranchal, Bihar, Jharkhand, Madhya Pradesh, Chhattisgarh, Assam and Jammu & Kashmir).

In High Performing States (HPS) and North Eastern States, all BPL women aged 19 years and above, all SC/ST women delivering in Govt. Health Centers, General wards of Distt. & State Hospitals and Accredited Private Institutions get the benefits of cash assistance.

Scale of cash assistance is higher in LPS and has got an ASHA component

- * Appointment of Accredited Social Health Activist (ASHA) for every village with a population up to 1000. ASHA will facilitate in accessing health care services to the community and will have specific responsibility of mobilizing pregnant women for antenatal care, institutional delivery and post-natal checks and immunization to children.
- * Ensuring skilled attendance at every birth both in the community and Institutions.
- * Operationalising 2000 Community Health Centers as First Referral Units (FRU) for providing Emergency Obstetric and Child Health services
- * Making 50% Primary Health Centers functional for providing 24-hours delivery services, over the next five years.
- * Strengthening of sub-centre by providing a flexi fund of Rs. 10,000/- for utilizing at the sub-center to improve the service delivery. The fund shall be operated jointly by the Local Panchayat Representative and ANM.
- * Organizing of Village Health & Nutrition Day at Anganwadi center at least once in every month.
- * Ensuring quality of services by implementing Indian Public Health Standards (IPHS) for Primary Healthcare Facilities.

Statement-I

Key Maternal Health Indicators Rapid Household Survey-DLHS I (98-99) & DLHS II (2002-04)

Sl.No.	State/UT/Agency	Any Antenatal Checkup		Three or more Antenatal check-up		Total Institutional Delivery		Safe Delivery	
		(98-93)	DLHS-I (2002-04)	DLHS-I (98-99)	DLHS-II (2002-04)	DLHS-I (98-99)	DLHS-II (2002-02)	DLHS-I (98-99)	DLHS-II (2002-04)
1	2	3	4	5	6	7	8	9	10
I.	All India	65.3	73.4	44.2	50.1	34.0	40.5	40.2	47.6
	MAJOR STATES (Population > 20 million)								
1.	Andhra Pradesh	94.2	94.5	87.5	88.1	50.6	60.9	59.8	69
2.	Assam	56.0	61.5	29.2	42.6	23.8	26.8	31.9	33.2
3.	Bihar	29.7	37.9	17.1	19.6	14.9	23.0	19.0	29.5
4.	Chhattisgarh		78.9		48.7		20.2		29.1
5.	Gujarat	79.1	87.6	55.0	61.4	46.1	52.2	55.9	62.1
6.	Haryana	77.7	87.6	41.3	48.6	25.7	35.1	32.7	43.2
7.	Jharkhand		52.2		32.8		22.4		27.8
8.	Karnataka	88.9	91.5	78.0	80.1	50.0	58.0	59.9	66.6
9.	Kerala	99.3	99.7	98.3	96.9	97.0	97.8	97.4	98.3
10.	Madhya Pradesh	52.4	74.1	28.0	34.6	21.5	*28.2	27.5	35.5
11.	Maharashtra	87.6	92.9	65.8	72.0	57.1	57.9	61.2	62.6
12.	Orissa	72.9	75.9	43.7	47.3	23.4	34.4	32.7	43.5
13.	Punjab	87.2	89.5	56.4	64.5	40.5	48.9	54.7	64.3
14.	Rajasthan	62.3	68.1	28.3	33.3	22.5	31.4	33.4	44.4
15.	Tamil Nadu	98.4	99.4	94.2	96.1	78.8	86.1	82.4	89.2

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1	2	3	4	5	6	7	8	9	10
16	<i>Uttar Pradesh</i>	46.8	57.8	19.6	24.7	16.2	22.4	20.8	28.7
17	<i>West Bengal</i>	84.1	90.7	55.4	28.0	38.9	46.3	45.6	54.1
II. SMALLER STATES/U.T.s (population 20 million)									
1.	<i>Ārunachal Pradesh</i>	44.4	58.6	25.6	40.9	26.3	34.8	28.1	37.7
2	<i>Delhi</i>	89.5	81.4	77.2	67.3	70.0	49.9	73.7	59.9
3.	Goa (North)	98.4	96.9	95.2	84.2	93.7	91.2	95.1	93.3
4.	Himachal Pradesh	87.2	91.0	57.2	68.0	31.7	45.1	36.3	51.4
5.	Jammu & Kashmir	58.1	87.7	40.4	80.6	44.4	70.5	46.8	73.2
5.	Manipur	71.2	77.8	48.5	58.2	34.1	44.6	49.9	57.8
7.	Meghalaya	55.0	54.6	33.5	43.8	33.4	30.9	35.6	34.5
8	Mizoram	80.4	74.3	66.6	56.3	58.9	52.6	62.9	60.6
9.	Nagaland	45.8	55.6	21.7	33.1	13.4	17.8	25.1	29.6
10	Sikkim	63.2	89.5	40.6	67.9	32.3	58.6	36.7	61.9
11	Tripura	69.2	82.2	51.0	66.4	46.1	62.4	48.3	65.1
12	Uttaranchal		32.6		28.0		23.7		32.5
III UNION TERRITORIES									
1.	A & N Islands	95.9	97.9	92.3	96.5	68.4	74.8	71.3	76.9
2	Chandigarh	79.6	90.5	73.0	75.6	67.7	47.4	71.2	59.1
3	O & N Haveli	90.6	96.0	74.6	79.1	25.9	46.5	27.6	54.7
4	Daman & Diu (Daman)	95.1	96.7	80.7	83.7	63.2	68.1	70.6	71.5
5	Lakshadweep	99.4	99.8	98.3	96.6	71.3	79.9	74.1	83.8
6	Pondicherry	99.8	100.0	95.8	97.9	92.2	97.2	93.4	98.5

Statement-II

Key Indicators Maternal Health-Comparison NFHS 1, 2 & 3

Name of the state	Population Covered	ANC			Therapeutic		ANC Institutional Delivery			IFA tablets Consumed for 90 days			Birth Attended by StIA (Doctor, Nurse, LHV, ANM, other health personnel)			PNC within 2 days			
		N1	N2	N3	N1	N2	N3	N1	N2	N3	N1	N2	N3	N1	N2	N3	N1	N2	N3
All India	Urban	84	86	91	-	-	73.7	58	66	69	-	-	X5	-	-	75.2	-	-	60.7
	Rural	56	60	72	-	-	42.8	17	25	31	-	-	18.1	-	-	39.1	-	-	28.1
	Total	66	66	77	439	44.2	50.7	26	34	41	-	-	223	330	42.4	48.2	-	-	36.4

*N1-1992-93
N2-1998-99
N3-2005-06